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| STATEMENT UNDER 37 CFR 3.73(b) | | | | | | |
|--|--|--|--|--|--|--|
| Applicant/Patent Owner: KYPHON INC. | | | | | | |
| Application No./Patent No.: 10/772,857/6,908,506 Filed/Issue Date: February 4, 2004/June 21, 2005 | | | | | | |
| Entitled: MAGNESIUM AMMONIUM PHOSPHATE CEMENT COMPOSITION | | | | | | |
| KYPHON INC. | Corporation | | | | | |
| (Name of Assignee) (Ty | pe of Assignee, e.g., corporation, partnership, university, government agency, etc.) | | | | | |
| states that it is: 1. the assignee of the entire right, title, and interest; or | | | | | | |
| 2. an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is%) | | | | | | |
| In the patent application/patent identified above by virtue of either: | | | | | | |
| A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached. | | | | | | |
| OR B. ✓ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows: | | | | | | |
| From: Michael ZIMMERMANN The document was recorded in the United Statement | es Patent and Trademark Office at | | | | | |
| From: SANATIS GMBH To: KYPHON, INC. The document was recorded in the United States Patent and Trademark Office at | | | | | | |
| Reel 014208 , Frame 0127 , or for which a copy thereof is attached. | | | | | | |
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| Additional documents in the chain of title are listed on a supplemental sheet. | | | | | | |
| As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11. [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08] | | | | | | |
| The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. | | | | | | |
| Signature | Date | | | | | |
| Jeffrey S. Abel | 512-439-7100 | | | | | |
| Printed or Typed Name | Telephone Number | | | | | |
| Authorized Legal Representativ | re | | | | | |
| Title | | | | | | |

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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| I hereby appoint: | | | | | | | |
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| OR | | | | | | | |
| Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): | | | | | | | |
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| as attornard | (e) or appoile) to | represent the understanced has | ore the United States | Patent and Tradema | A Office (HEBTO) in | naction with | |
| as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3,73(b). | | | | | | | |
| Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: | | | | | | | |
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| City | | | State | | Zip | | |
| Country | | | | | | | |
| Telephone | | | Email | | | | |
| <u> </u> | | | | 1 | | | |
| Assignee Name and Address: | | | | | | | |
| KYPHON INC. | | | | | | | |
| 1221 Crossman Avenue | | | | | | | |
| Sunnyvale, CA 94089 | | | | | | | |
| A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be | | | | | | | |
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| the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. | | | | | | | |
| SIGNATURE of Assignoe of Record | | | | | | | |
| The individual whose signature and title is supplied below is authorized to act on behalf of the assignee | | | | | | | |
| Signature | Tun | een Ohn | | | Date | | |
| Name | Noree | 7 | | | Telephone 901-39 | 6-3133 | |
| Title | Ŧ | President | | | | | |

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